In this Issue

2 Member Rights & Responsibilities
2 Medication Therapy Management
3 Improving Your Health Through Exercise
3 Helping Medicare Members with Quality of Care
4 Annual Wellness Visit

Our Nurses are Here for You

Always Ready to Help

After a hospital stay: A nurse navigator at The Health Plan will call you within the first week of your discharge. The nurse will ask you how you are doing, help you understand your discharge instructions, and be sure you’re keeping important follow-up appointments.

Behavioral health services: The Health Plan’s nurse navigators are happy to answer any question or concerns you may have. They are skilled in addressing any issue you may be experiencing while also providing you with educational and community resources.

You can contact Behavioral Health Services at 1.877.221.9295.

Case management: The Health Plan has registered nurses who are certified case managers. They coordinate health care services for members with catastrophic illnesses, injuries or behavioral health problems. You can contact the case managers by calling the Medical Department at 1.800.624.6961, ext. 7643.

You may also submit a member case management referral form online at healthplan.org.

Nurse information line: Call for help, any time. The nurse information line provides members with access to a nurse 24 hours a day, 7 days a week. A registered nurse can help if you have concerns, need assistance accessing services or obtaining urgent care out of the area.

The nurse information line is not meant to replace any services offered by our health care providers including after-hours assistance.

You can contact the nurse information line by calling a nurse directly at 304.639.8597.

After hours you can reach a Behavioral Health Services nurse at 1.877.221.9295.

Participating Urgent Care Facilities Update.

It’s good to have options

Your primary care physician (PCP) is often the first point of contact when you have a health concern. However, there are times when you can’t wait for an appointment with your PCP. If your doctor’s office is closed and you can’t wait for an appointment, you have options for non-emergency care. Visit healthplan.org/ucf to view our latest list of urgent care providers in your area. Call us at 1.800.624.6961 (TTY: 711) for more information.
Member Rights & Responsibilities

Visit our website to learn about your member rights and responsibilities. You can also learn how we use and disclose your health information. This information can be found at healthplan.org/medicare. To request a printed copy of your member rights and responsibilities call 1.800.624.6961.

To view your plan benefits, visit myplan.healthplan.org to login to create an account.

Medication Therapy Management

Medication Therapy Management (MTM) is a free and beneficial service offered by The Health Plan to members that qualify. We understand that many members have a large list of medications that can get complex, confusing, and costly. The goal of the MTM program is to optimize your medications so they can work as well as possible for you.

If you meet MTM program eligibility criteria, a SinfoniaRX team member will initially contact you with a letter in the mail. The Health Plan has partnered with SinfoniaRX for their MTM services. They offer some of the best programs on the market, and their pharmacists are specially trained in this area. They will welcome you to the program and offer you the opportunity for a comprehensive medication review. This medication review will take place over the telephone in the comfort of your own home. The telephone interview typically takes about a half hour. During the call, you will go over current prescription medications, over-the-counter medications, and any herbals/vitamins you take with the pharmacist.

After the review, the SinfoniaRX pharmacist will take a look at your medication list and any other information you provided. They can work with you and your prescriber to make sure all of the medications you are taking are necessary, safe, and cost-effective. This service gives you a great opportunity to take an active role in your health care, as part of a team with your prescriber and a pharmacist. Any adjustments that may need to be made will be discussed and resolved, and you will be provided with an updated medication list.

The telephone number for SinfoniaRX is 1.520.382.6554 and “Express Scripts” will be the name that comes across on caller ID. Please do not be alarmed if you receive a call from this number, as it will be regarding MTM services. We hope that as many members of The Health Plan as possible are able to take advantage of this opportunity.
Improving Your Health Through Exercise

The risks of leading an unhealthy lifestyle are clear. Still, most seniors don’t exercise regularly or follow a healthy diet. Good nutrition and exercise can also help you manage your weight, increase your mobility, and improve your mood. It can make it easier to do the things you want to do so you can stay independent longer.

3 reasons to make exercise a regular part of your routine

1. There are immediate benefits. One single session of moderate-to-vigorous physical activity (walking at a brisk pace, cycling, fitness class) can reduce blood pressure and improve insulin sensitivity. It can help you sleep better, reduce anxiety, and even help you think more clearly for the day.

2. There are long-term benefits. A regular exercise program can help prevent or delay many chronic conditions. It can help you maintain a healthy weight and reduce your risk of falling. Exercising regularly can improve your strength, balance, energy, and flexibility so you can do the things you want to do and maintain your independence.

3. There are social benefits. Joining a walking or hiking group, attending fitness classes, or participating in sports is a great way to socialize and spend time with others. That’s good for your mental health. Feeling better and having more energy could also make it easier to join in family activities and events with your grandparents.

Being active can simply make you feel better. And while the health benefits of regular exercise are greater with higher intensity, more frequency, and/or longer duration, any amount of physical activity is better than none. As little as 60 minutes a week of exercise can deliver some health benefits. To reduce your risk of chronic disease and other health-related issues, try to get 150 minutes a week of moderate-intensity aerobic activity. Most importantly, find an activity you enjoy.

Use your SilverSneakers® benefit to get started. Visit SilverSneakers.com/StartHere to get your SilverSneakers member ID number and get started today!

Always talk with your doctor before starting an exercise program.

Helping Medicare Members with Quality of Care

The Quality Improvement Organization for serving Medicare beneficiaries in West Virginia and Ohio has changed from KEPRO to Livanta BFCC-QIO Program, effective June 8, 2019.

Livanta BFCC-QIO Program has a group of doctors and other health care professionals who are paid by the federal government. This organization is paid by Medicare to check on and help improve the quality of care for people with Medicare. Livanta BFCC-QIO Program is an independent organization. It is not connected with our plan.

You should contact Livanta BFCC-QIO Program in any of these situations:

- You have a complaint about the quality of care you have received.
- You think coverage for your hospital stay is ending too soon.
- You think coverage for your home health care, skilled nursing facility care, or comprehensive outpatient rehabilitation facility (CORF) services are ending too soon.

**West Virginia Beneficiaries Contact:**
Livant BFCC-QIO Program
Call: 1.888.396.4646, TTY: 1.888.985.2660
Write: Livanta BFCC-QIO Program
10820 Guilford Road, Suite 202
Annapolis Junction, MD 20701
Website: livantaqio.com/

**Ohio Beneficiaries Contact:**
Livant BFCC-QIO Program
Call: 1.888.524.9900, TTY: 1.888.985.8775
Write: Livanta BFCC-QIO Program
10820 Guilford Road, Suite 202
Annapolis Junction, MD 20701
Website: livantaqio.com/
Annual Wellness Visit

As a Medicare Advantage member of The Health Plan, you are eligible for an annual wellness visit once every 12 months at no cost to you. Your wellness visit is a good opportunity for you to have a chance to discuss with your doctor the best way for you to achieve good health.

Your wellness visit includes:

• In-depth discussion of your health history, family history, and surgical history
• Medications (please bring a list of your current medications including name, dose, and how often you take them)
• Weight, body mass index (BMI), and blood pressure
• Your nutrition and physical activity

At a well visit, your doctor will ask you questions about a variety of topics such as your vision, hearing, mobility, falls with fall risk prevention, anxiety, and depression. Other age-related health screening can include but are not limited to abdominal aortic aneurism, bone-density, cardiovascular disease, colonoscopy, cholesterol, mammogram, and diabetes. This would be a good time to discuss with the doctor if you may need some assistance with your daily activities such as cooking, taking care of yourself, medication issues, or grocery shopping. The doctor may be able to recommend solutions to help you.

Your doctor can also review your care from other physicians or specialists you receive care from. If you see any specialists, VA, etc. remember to ask them to send a copy of your care to your PCP from your visit. This can help your doctor give suggestions to help maintain your wellness, prevent hospitalizations and reduce risk for chronic diseases.

Please take a moment to call your doctor to schedule your annual wellness visit today and take advantage of this no cost appointment that you deserve as a member of The Health Plan.